

PTO/SB/82 (04-05)

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Application Number	10/629043
Filing Date	July 28, 2003
First Named Inventor	Littel, Mark
Art Unit	3743
Examiner Name	Ali, Shumaya
Attorney Docket Number	Littel'

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

OR

I hereby appoint the practitioners associated with the Customer Number:

Please change the correspondence address for the above-identified application to:

The address associated with
Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Thomas J. Finn, Esq. No. 48,066
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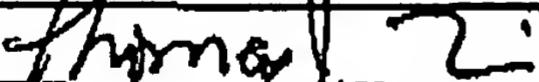
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I am the:

- Applicant/Inventor.
 Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	
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Name	Thomas J. Finn, Attorney for Applicant
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Date	5-18-05	Telephone	520-207-1615
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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

*Total of _____ forms are submitted.

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